

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Accusation
Against:**

FRED SUESS, M.D.

**Physician's and Surgeon's
Certificate No. G26266**

Respondent

Case No. 800-2014-006221

**ORDER CORRECTING CLERICAL ERROR IN "EFFECTIVE DATE" ON
ORDER PAGE**

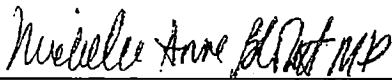
On its own motion, the Medical Board of California (hereafter "board") finds that there is a clerical error in the "effective date" on the Order page of the Decision in the above-entitled matter and that such clerical error should be corrected so that the effective date is correct.

IT IS HEREBY ORDERED that the effective date on the Order page in the above-entitled matter be and hereby amended and corrected nunc pro tunc as of the date of entry, to read as follows.

This Decision shall become effective at 5:00 p.m. on November 3, 2017.

IT IS SO ORDERED: October 12, 2017.

MEDICAL BOARD OF CALIFORNIA



**Michelle Anne Bholat, M.D., Chair
Panel B**

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Accusation
Against:**

Fred Suess, M.D.

Case No. 800-2014-006221

**Physician's and Surgeon's
Certificate No. G26266**

Respondent

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 6, 2017.

IT IS SO ORDERED October 6, 2017.

MEDICAL BOARD OF CALIFORNIA

By: Michelle Anne Bholat
Michelle Anne Bholat, M.D., Chair
Panel B

1 XAVIER BECERRA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 LAWRENCE MERCER
Deputy Attorney General
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Attorneys for Complainant
7

8 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
9 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

10 In the Matter of the Accusation Against:

Case No. 800-2014-006221

11 **FRED SUESS, M.D.**
12 1700 California Street, Suite 500
San Francisco, CA 94109

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

13
14 Physician's and Surgeon's Certificate G26266

15 Respondent.
16

17 **IT IS HEREBY STIPULATED AND AGREED** by and between the parties to the above-
18 entitled proceedings that the following matters are true:

19 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
20 of California. She brought this action solely in her official capacity and is represented in this
21 matter by Xavier Becerra, Attorney General of the State of California, by Lawrence Mercer.
22

23 2. Respondent Fred Suess, M.D. ("Respondent") is represented in this matter by his
24 attorneys John H. Dodd and Craddick, Candland & Conti, 2420 Camino Ramon, Suite 202, San
25 Ramon, CA 94583.

26 3. On or about January 7, 1974, the Medical Board of California issued Physician's and
27 Surgeon's certificate Number G26266 to Fred Suess, M.D. (Respondent). The Physician's and
28

1 Surgeon's certificate was in full force and effect at all times relevant to the charges brought herein
2 and will expire on November 30, 2018, unless renewed.

3 **JURISDICTION**

4 4. On January 22, 2016, Complainant Kimberly Kirchmeyer, in her official capacity as
5 the Executive Director of the Board, filed Accusation No. 800-2014-006221(Accusation) against
6 Respondent. The Accusation was duly served upon Respondent and he timely filed a Notice of
7 Defense. A copy of the Accusation is attached hereto as Exhibit A.

8 **ADVISEMENT AND WAIVERS**

9
10 5. Respondent has carefully read, fully discussed with counsel, and understands the
11 charges and allegations in Accusation No. 800-2014-006221.

12 6. Respondent has carefully read and fully understands the contents, force and effect of
13 this Stipulated Settlement and Disciplinary Order, and has fully reviewed and discussed same
14 with his attorney of record.

15 7. Respondent is fully aware of his legal rights in this matter including his right to a
16 hearing on the charges and allegations contained in Accusation No. 800-2014-006221, his right to
17 present witnesses and evidence and to testify on his own behalf, his right to confront and cross-
18 examine all witnesses testifying against him, his right to the issuance of subpoenas to compel the
19 attendance of witnesses and the production of documents, his right to reconsideration and court
20 review of an adverse decision, and all other rights accorded him pursuant to the California
21 Administrative Procedure Act, the California Code of Civil Procedure, and all other applicable
22 laws, having been fully advised of same by his attorney of record. Respondent, having the benefit
23 of counsel hereby knowingly, intelligently, freely and voluntarily waives and gives up each and
24 every one of the rights set forth and/or referenced above.

25 **CULPABILITY**

26
27 8. Respondent agrees that, at an administrative hearing, complainant could establish a
28 *prima facie* case with respect to the charges and allegations contained in Accusation No. 800-

1 2014-006221 and that he has thereby subjected his Physician's and Surgeon's Certificate to
2 disciplinary action. Respondent further agrees to be bound by the Board's imposition of
3 discipline as set forth in the Disciplinary Order below.

4 **CONTINGENCY**

5 9. This stipulation shall be subject to approval by the Medical Board of California.
6 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
7 Board of California may communicate directly with the Board regarding this stipulation and
8 settlement, without notice to or participation by Respondent or his counsel. By signing the
9 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
10 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
11 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
12 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
13 action between the parties, and the Board shall not be disqualified from further action by having
14 considered this matter.
15

16
17 10. The parties understand and agree that facsimile copies of this Stipulated Settlement
18 and Disciplinary Order, including electronic PDF and facsimile signatures thereto, shall have the
19 same force and effect as the originals.

20 11. In consideration of the foregoing admissions and stipulations, the parties agree that
21 the Board may, without further notice or formal proceeding, issue and enter the following
22 Disciplinary Order:
23

24 **DISCIPLINARY ORDER**

25
26 **A. PUBLIC REPRIMAND**

27 **IT IS HEREBY ORDERED:** that Respondent Fred Suess, M.D., Physician's and
28 Surgeon's Certificate No. G26266, shall be and is hereby publicly reprimanded pursuant to

1 California Business and Professions Code § 2227(a)(4). This Public Reprimand, which is issued
2 in connection with Respondent's actions as set forth in Accusation No. 12-2013-231181, is as
3 follows:

4 On September 26, 2013, you were the surgeon who performed cosmetic surgical
5 procedures on Patient E.C. Prior to and during the procedures, E.C. had elevated
6 blood pressure and, during the procedures, E.C. became hypoxic. Although you
7 recorded blood pressure and oxygen level readings, you failed to document the intra-
operative medical response to E.C.'s hypertension and hypoxia.

8 **B. MEDICAL RECORD KEEPING COURSE** Within 60 days of the effective date
9 of this decision, Respondent shall enroll in a course in medical record keeping, at Respondent's
10 expense, approved in advance by the Board or its designee.

11 A medical record keeping course taken after the acts that gave rise to the charges in the
12 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
13 or its designee, be accepted towards the fulfillment of this condition if the course would have
14 been approved by the Board or its designee had the course been taken after the effective date of
15 this Decision. Respondent shall submit a certification of successful completion to the Board or its
16 designee. Failure to successfully complete the medical record keeping course shall constitute
17 unprofessional conduct and grounds for further disciplinary action.
18

19 In consideration for his agreement to complete the medical record keeping course, as set
20 forth above, Respondent shall be publicly reprimanded as set forth in the public letter of
21 reprimand, as set forth above in Paragraph 11(A).
22

23 **C. EDUCATION COURSE:** Within 60 calendar days of the effective date of this
24 Decision, Respondent shall submit to the Board or its designee for its prior approval educational
25 program(s) or course(s) which shall not be less than 25 hours. The educational program(s) or
26 course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be
27 Category I and include: Pre-operative patient evaluation, informed consent, management of intra-
28

1 operative hypertension and hypoxia, and medical record keeping. The educational program(s) or
2 course(s) shall be at Respondent's expense and shall be in addition to the Continuing Medical
3 Education (CME) requirements for renewal of licensure. Following the completion of each
4 course, the Board or its designee may administer an examination to test Respondent's knowledge
5 of the course. Respondent shall provide proof of attendance for 50 hours of CME of which 25
6 hours were in satisfaction of this condition.

7 In consideration for his agreement to complete the education course, as set forth above,
8 Respondent shall be publicly reprimanded as set forth in the public letter of reprimand, as set
9 forth above in Paragraph 11(A).
10

11 //

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16 //

ACCEPTANCE

I, FRED SUESS, M.D., have carefully read this Stipulated Settlement and Disciplinary Order and, having the benefit of counsel, enter into it freely, voluntarily, intelligently and with full knowledge of its force and effect on my Physician's and Surgeon's Certificate No. G26266. I fully understand that, after signing this stipulation, I may not withdraw from it, that it shall be submitted to the Medical Board of California for its consideration, and that the Board shall have a reasonable period of time to consider and act on this stipulation after receiving it. By entering into this stipulation, I fully understand that, upon formal acceptance by the Board, I shall be publically reprimanded by the Board and shall be required to comply with the terms and conditions of the Disciplinary Order set forth above. I, also, fully understand that any failure to comply with the terms and conditions of the Disciplinary Order set forth above shall constitute unprofessional conduct and that my Physician's and Surgeon's Certificate No. G26266 will be subject to further disciplinary action.

Dated:

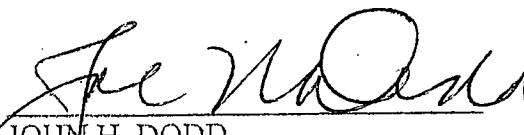


FRED SUESS, M.D.
Respondent

I have read and fully discussed with Respondent FRED SUESS, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

Dated: 8/22/17

CRADDICK, CANDLAND & CONTI



JOHN H. DODD
Attorneys for Respondent

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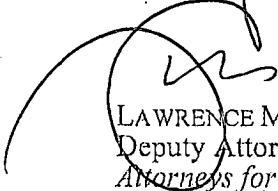
ENDORSEMENT

The foregoing Stipulation is respectfully submitted for consideration by the Medical Board
of California, Department of Consumer Affairs.

Dated: 8/22/2017

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General



LAWRENCE MERCER
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

1 KAMALA D. HARRIS
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
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Attorneys for Complainant

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO January 22 20 16
BY D. Firdaus ANALYST

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 800-2014-006221

FRED SUESS, M.D.
1700 California Street, Suite 500
San Francisco, CA 94109

A C C U S A T I O N

Physician and Surgeon's Certificate
No. G 26266,

Respondent.

Complainant alleges:

PARTIES

1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about January 7, 1974, the Medical Board issued Physician and Surgeon's Certificate Number G 26266 to Fred Suess, M.D. (Respondent). The Physician and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on November 30, 2016, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

1 4. Section 2227 of the Code states:

2 “(a) A licensee whose matter has been heard by an administrative law
3 judge of the Medical Quality Hearing Panel as designated in Section 11371 of the
4 Government Code, or whose default has been entered, and who is found guilty, or
5 who has entered into a stipulation for disciplinary action with the board, may, in
6 accordance with the provisions of this chapter:

7 “(1) Have his or her license revoked upon order of the board.

8 “(2) Have his or her right to practice suspended for a period not to exceed
9 one year upon order of the board.

10 “(3) Be placed on probation and be required to pay the costs of probation
11 monitoring upon order of the board.

12 “(4) Be publicly reprimanded by the board. The public reprimand may
13 include a requirement that the licensee complete relevant educational courses
14 approved by the board.

15 “(5) Have any other action taken in relation to discipline as part of an
16 order of probation, as the board or an administrative law judge may deem proper.

17 “(b) Any matter heard pursuant to subdivision (a), except for warning
18 letters, medical review or advisory conferences, professional competency
19 examinations, continuing education activities, and cost reimbursement associated
20 therewith that are agreed to with the board and successfully completed by the
21 licensee, or other matters made confidential or privileged by existing law, is deemed
22 public, and shall be made available to the public by the board pursuant to Section
23 803.1.”

24 5. Section 2234 of the Code, states:

25 “The board shall take action against any licensee who is charged with
26 unprofessional conduct. In addition to other provisions of this article, unprofessional
27 conduct includes, but is not limited to, the following:

28 “(a) Violating or attempting to violate, directly or indirectly, assisting in
or abetting the violation of, or conspiring to violate any provision of this chapter.

 “(b) Gross negligence.

 “(c) Repeated negligent acts. To be repeated, there must be two or more
negligent acts or omissions. An initial negligent act or omission followed by a
separate and distinct departure from the applicable standard of care shall constitute
repeated negligent acts.

 “(1) An initial negligent diagnosis followed by an act or omission
medically appropriate for that negligent diagnosis of the patient shall constitute a
single negligent act.

 “(2) When the standard of care requires a change in the diagnosis, act, or
omission that constitutes the negligent act described in paragraph (1), including, but
not limited to, a reevaluation of the diagnosis or a change in treatment, and the

licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.

“(d) Incompetence.

“(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.

“(f) Any action or conduct which would have warranted the denial of a certificate.

“(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.

“(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board.”

6. Section 2266 of the Code states: “The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.”

FACTS RE: PATIENT E.C.¹

7. In 2013, Respondent was an independent contractor providing facial cosmetic surgery services two days a week for the Lifestyle Lift clinic in San Ramon, California. E.C., a 57 year-old male, made an appointment with Lifestyle Lift in San Ramon for September 7, 2013. E.C. indicated that he was interested in improving the appearance of his lower face and eyes. E.C. filled out a medical history form, on which, without explanation, he checked, “Yes” to the question, “Are you currently undergoing radiation therapy or chemotherapy for cancer?” He did not list the name of his primary care physician (PCP) on the form, but did indicate that his PCP could be contacted for any questions. He indicated he was taking no medications and had no allergies. He listed no prior surgeries.

8. On September 13, 2013, E.C. met with Dr. G.K., a plastic surgeon working for Lifestyle Lift, for a pre-operative visit. Dr. K. performed a history and physical examination and

¹ Initials are used to protect patient privacy. Respondent will be provided with the full name of the patient and others referred to by initial pursuant to his Request for Discovery.

1 wrote prescriptions for Valium 5 mg. #20, Tylenol with Oxycodone 10/325 #30, and Keflex 500
2 mg. Dr. K. indicated that E.C. had hypertension but was not on any medication. E.C.'s blood
3 pressure was noted to be 152/97. E.C. signed informed consent forms for Lifestyle Lift face and
4 neck-firming procedures, as well as blepharoplasty. Dr. K. did not co-sign the forms, indicating
5 that he had personally reviewed the risks, benefits, and alternatives of the procedures with E.C.
6 and answered all questions. Dr. K. noted his surgical plan as "Face & neck. Upper lids skin only.
7 Possible fat transfer to cheeks. Fast absorbing suture." Dr. K. did not sign his surgical plan.

8 9. Dr. G.K. left his position at Lifestyle Lift, and E.C.'s care was transferred to
9 Respondent. Surgery was rescheduled for September 26, 2013 with Respondent, and a "Meet the
10 Doctor" date of September 19, 2013 was scheduled. On September 16, 2013, Respondent filled
11 out and signed a History and Physical Examination form on E.C. The form documented only the
12 facial examination and surgical plan, including lower lid laser. There is no documentation of vital
13 signs, particularly no blood pressure reading. E.C. signed new informed consent forms for
14 Lifestyle Lift face and neck firming surgery and blepharoplasty by Respondent. Respondent did
15 not co-sign the informed consent forms indicating that he had personally reviewed the risks,
16 benefits, and alternatives of the procedures with E.C. and answered all questions. There is no
17 consent form for laser resurfacing.

18 10. On September 25, 2013, E.C. saw Respondent, and Respondent's notes indicate
19 "Famvir"² and "take BP today." There is no documentation in the chart that a prescription for
20 Famvir was written or that the drug was dispensed or used by the patient. There is also no
21 documentation that E.C.'s blood pressure was taken.

22 11. E.C. presented for surgery on September 26, 2013. Vital signs were taken, and his
23 blood pressure was documented as 177/116 right and 160/95 left. At 11:30 a.m., E.C. was in the
24 surgical suite and was given oral sedation consisting of diazepam 30 mg.; lorazepam 1 mg.;
25 acetaminophen with hydrocodone 5/325; promethazine 25 mg.; clonidine 0.1 mg.; and
26

27 ² Famvir is an antiviral drug designed to reduce the risk of a herpetic outbreak, and its
28 administration here would be to protect the lower eyelids where laser resurfacing was to take place.

1 diphenhydramine 25 mg. Local anesthesia was infiltrated into the facial skin and subcutaneous
2 tissues one hour and fifteen minutes later at 12:45 p.m. This consisted of 1% lidocaine with
3 1:100,000 epinephrine (75 ml.); .25% bupivacaine with 1:200,000 epinephrine (30 ml.); normal
4 saline (60 ml.); and approximately 1:150,000 epinephrine, with the total being approximately 200
5 ml. of local anesthesia infiltrated.

6 12. Surgery commenced sometime after 1:00 p.m. on September 26, 2013. E.C.'s pulse
7 rate, oxygen saturation, and blood pressure were monitored automatically throughout the
8 procedure. E.C. remained hypertensive throughout the procedure, and no additional medications
9 were provided for blood pressure control. The procedure began with E.C.'s oxygen saturation at
10 98%. At 1:32 p.m., the oxygen saturation dropped to 58% and remained in the 60-70% range
11 until approximately 3:15 p.m., when it returned to the 90% range. Additional sedating drugs were
12 given between 4:05 p.m. and 4:30 p.m., and oxygen readings fell again into the 50-70% range
13 until the end of the procedure with only occasional readings in the normal range.

14 13. Although not documented in the record, Respondent indicates that sometime after
15 3:00 p.m., he was called upon to attend a post-operative patient who had presented with incisions
16 on her face that had opened, an emergency. Respondent left E.C. in the surgical suite and, after
17 20 to 30 minutes attending to the emergency patient, Respondent returned to the surgical suite to
18 complete E.C.'s surgery. Neither his departure from the OR nor the names and qualifications of
19 those attending the patient in his absence are documented in the operative note. Upon
20 Respondent's return, E.C. was given additional oral sedation, as well as more local anesthesia.
21 The time of injection of an additional 44 ml. of local anesthesia was not documented on the
22 Patient Surgery Information Sheet. The certified surgical technician administered the anesthesia
23 under Respondent's supervision and assisted in the procedure; Respondent indicated at his subject
24 interview with the Board on July 30, 2015 that a nurse was also present, but this is not
25 documented in the record. Surgery was completed at approximately 6:00 p.m. E.C.'s final blood
26 pressure was 186/116. E.C. was discharged home at 6:25 p.m.

27 14. The Operative Report on E.C. signed by Respondent is a template document that
28 provides no personal detail on the procedure. For example, the template states that skin openings

1 were left behind E.C.'s ears for expressing fluid, but the post-operative notes state that the patient
2 had drainage tubes placed bilaterally. The Operative Report states that a lower lid blepharoplasty
3 was performed, but no such procedure was performed on E.C.

4 15. Post-operative photographs of E.C. were taken on September 27, 2013, but there is
5 no progress note for this visit. A note for a visit on September 28, 2013 was signed by a
6 technician and noted that the drainage tubes were being left in place; E.C. was apparently not seen
7 by a physician on this visit. On September 30, 2013, E.C. was examined by Respondent
8 (although he did not sign the progress note); at this time, the remaining drainage tube was
9 removed; E.C.'s blood pressure was recorded as 187/113; advice given to E.C. was to rest and
10 relax. On October 2, 2013, E.C. was seen by staff, and his eyelid sutures were removed; E.C.'s
11 blood pressure was recorded as 154/94. On October 5, 2013, E.C.'s blood pressure was recorded
12 as 162/105; there is no progress note for this visit, except that an unsigned addendum to the
13 October 2, 2013 visit indicates that the facelift sutures were removed on October 5, 2013. Post-
14 operative photographs were taken on October 21, 2013, but there is no accompanying progress
15 note.

16 16. Patient E.C. was dissatisfied with the results of the procedure and the care he received
17 from Respondent. E.C. filed a consumer complaint, which the Board received on June 23, 2014.

18 **FIRST CAUSE FOR DISCIPLINE**

19 **(Gross Negligence/Negligence)**

20 17. The allegations of paragraphs 7 through 16, above, are incorporated herein by
21 reference as if fully set forth.

22 18. Respondent Fred Suess, M.D. is subject to disciplinary action under section 2234(b)
23 and/or (c) of the Code in that he was grossly negligent and/or repeatedly negligent in his care and
24 treatment of patient E.C. by reason of the following acts or omissions:

25 A. Patients presenting for cosmetic surgery must have a physical examination by a
26 physician and must be deemed healthy enough to tolerate the procedure. E.C. presented with
27 evidence of hypertension at his initial visit, and he remained hypertensive throughout his
28 interactions with Lifestyle Lift Clinic in San Ramon. Respondent indicates that he did notify E.C.

1 that he should follow up with this primary care physician regarding his blood pressure, but this is
2 nowhere indicated in the record.

3 B. Performing surgery on a hypertensive patient adds additional risk to the procedure for
4 excessive bleeding, hematoma formation, and stroke. Such a risk should be mitigated prior to the
5 initiation of any elective procedure. E.C. was allowed to proceed to surgery despite this increased
6 risk.

7 C. If a patient becomes hypertensive during a surgical procedure, medications should be
8 provided to the patient to stabilize the blood pressure. E.C. remained hypertensive throughout his
9 surgery, and Respondent failed to provide any blood pressure reducing medications, other than the
10 small doses of clonidine that were administered.

11 D. E.C. was repeatedly hypoxic for significant periods of time during the surgical
12 procedure. If a patient becomes hypoxic during a procedure, it is required to assure the oxygen
13 saturation probe is working correctly and to provide exogenous oxygen for the patient to breathe
14 and return his oxygen saturation to the normal range. There is no documentation that Respondent
15 or the other medical staff present noted or responded to E.C.'s low oxygen saturation during the
16 procedure.

17 **SECOND CAUSE FOR DISCIPLINE**

18 **(Inaccurate/Inadequate Record Keeping)**

19 19. Respondent Fred Suess, M.D. is subject to disciplinary action under sections 2266
20 and 2234 of the Code in that he failed to maintain adequate and accurate medical records.

21 20. The allegations of paragraphs 7 through 16, above, are incorporated herein by
22 reference as if fully set forth.

23 21. Patient encounters must be documented with a contemporaneous note signed by the
24 provider of service, and all services provided should be accurately documented. In E.C.'s medical
25 record, there are numerous instances of unsigned and incomplete notes, as well as absence of
26 notes. Vital signs, if taken, are at times not entered in the record. A prescription for Famvir,
27 which Respondent indicated was given, was not in the record, although all other prescriptions are
28 photocopied and appear in the record. There was no documentation of Respondent's absence

1 from the surgical suite and no indication of personnel that were left in charge of E.C. while he
2 was in attendance on an emergency patient. Respondent's operative notes for E.C. are inadequate
3 and inaccurate.

4 **PRAYER**

5 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
6 and that following the hearing, the Medical Board of California issue a decision:

- 7 1. Revoking or suspending Physician and Surgeon's Certificate Number G 26266, issued
8 to Fred Suess, M.D.;
- 9 2. Revoking, suspending or denying approval of Fred Suess, M.D.'s authority to
10 supervise physician assistants, pursuant to section 3527 of the Code;
- 11 3. Ordering Fred Suess, M.D., if placed on probation, to pay the Board the costs of
12 probation monitoring; and
- 13 4. Taking such other and further action as deemed necessary and proper.

14
15 DATED: January 22, 2016


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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